

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Roche Inc. Good Government Fund

ADDRESS (number and street)

340 Kingsland Street

☐Check if different  
than previously  
reported. (ACC)

Nutley

NJ

07110

1199

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00072769

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

02

01

2006

through

02

28

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. David McDede

Signature of Treasurer

Electronically Filed by Mr. David McDede

Date

04

19

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Roche Inc. Good Government Fund

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	2		0	1		2	0	0	6

To:

M	M		D	D		Y	Y	Y	Y
0	2		2	8		2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		62594.20
(b) Cash on Hand at Beginning of Reporting Period .....	75858.39	
(c) Total Receipts (from Line 19) .....	21713.30	40612.49
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	97571.69	103206.69
7. Total Disbursements (from Line 31) .....	20435.00	26070.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	77136.69	77136.69
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Roche Inc. Good Government Fund

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4035.53	12316.27
(i) Itemized (use Schedule A) .....	10171.18	20783.02
(ii) Unitemized .....	14206.71	33099.29
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	0.00	0.00
(b) Political Party Committees .....	2500.00	2500.00
(c) Other Political Committees (such as PACs) .....	16706.71	35599.29
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	6.59	13.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	21713.30	40612.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	21713.30	40612.49

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	10.00	145.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	10.00	145.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19000.00	24500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) ..... ➡	0.00	0.00
29. Other Disbursements.....	1425.00	1425.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	20435.00	26070.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	20435.00	26070.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	16706.71	35599.29
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16706.71	35599.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	10.00	145.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10.00	145.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

<b>A.</b> Full Name (Last, First, Middle Initial) George Abercrombie			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6	
Mailing Address 340 Kingsland Street Building 85/8 C/O Hoffmann La Roche Inc.			<b>Transaction ID:</b> 76991-01127260923385	
City State Zip Code Nutley NJ 07110-1150			Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Hoffmann-La Roche Inc.		Occupation President & Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 832.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Dennis Burns			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 41 Park Lane			<b>Transaction ID:</b> 0303200643	
City State Zip Code Essex Fells NJ 07021-1107			Amount of Each Receipt this Period 104.65	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Hoffmann-La Roche Inc.		Occupation Vice President Global Business Develop		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.30		
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Eging			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 7 Shore Road			<b>Transaction ID:</b> 0303200672	
City State Zip Code Andover NJ 07821-2240			Amount of Each Receipt this Period 208.00	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Hoffmann-La Roche Inc.		Occupation Executive Director Public Pol		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 416.00		

**SUBTOTAL** of Receipts This Page (optional) .....

728.65

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Darin Gardner Mailing Address 14503 Pleffner Court City State Zip Code Bowie MD 20720-4820 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hoffmann-La Roche Inc. Occupation Assistant Director Fed Government Affr Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 0303200697 Amount of Each Receipt this Period 208.00
<b>B.</b> Full Name (Last, First, Middle Initial) Carolyn Glynn Mailing Address 98 Grover Lane W City State Zip Code West Caldwell NJ 07006-7934 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hoffmann-La Roche Inc. Occupation Vice President Public Affairs Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 0303200610 Amount of Each Receipt this Period 208.00
<b>C.</b> Full Name (Last, First, Middle Initial) Frederick Kentz Mailing Address 180 Washington Avenue City State Zip Code Chatham NJ 07928-1858 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hoffmann-La Roche Inc. Occupation Vice President Secretary & Gen Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 76991-07700747251510 Amount of Each Receipt this Period 208.00

**SUBTOTAL** of Receipts This Page (optional) .....

624.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

Full Name (Last, First, Middle Initial)

**A.** Joseph Laudano

Mailing Address 167 Sunset Avenue

City

Verona

State

NJ

Zip Code

07044-2317

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roche Labs Inc.

Occupation

Prod Director

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

472.57

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 03032006178

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

**B.** Marion Lomonaco

Mailing Address 69 Brook Street

City

Garden City

State

NY

Zip Code

11530-6312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roche Labs Inc.

Occupation

Account Manager

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.16

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 03032006420

Amount of Each Receipt this Period

152.08

Full Name (Last, First, Middle Initial)

**C.** Kelli Mills

Mailing Address 6967 Fairfax Drive

City

Arlington

State

VA

Zip Code

22213-1708

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hoffmann-La Roche Inc.

Occupation

Assistant Director Fed Government Aff

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 0303200689

Amount of Each Receipt this Period

208.00

**SUBTOTAL** of Receipts This Page (optional) .....

776.08

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

**A.**

Full Name (Last, First, Middle Initial)

Evan Morris

Mailing Address 7007 Stone Inlet Drive

City

Fort Belvoir

State

VA

Zip Code

22060-7432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hoffmann-La Roche Inc.

Occupation

Executive Director Fed Government Aff

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 0303200694

Amount of Each Receipt this Period

208.00

**B.**

Full Name (Last, First, Middle Initial)

RICHARD NAPLES

Mailing Address Indianapolis, IN 46236

City

Indianapolis

State

IN

Zip Code

46236

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roche Diagnostics Corp US

Occupation

VP US Reg., Reimbursement & Govt. Affa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 040606-2

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID NICHOLS

Mailing Address Alexandria, VA 22301

City

Alexandria

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Roche Diagnostics Corp US

Occupation

Director Federal Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

838.16

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 040606-6

Amount of Each Receipt this Period

419.08

**SUBTOTAL** of Receipts This Page (optional) .....

827.08

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin Noble Mailing Address 2 Surrey Lane City State Zip Code Sparta NJ 07871-1727 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 03032006364 Amount of Each Receipt this Period 208.00
Name of Employer Roche Labs Inc. Occupation Director Marketing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00		
<b>B.</b> Full Name (Last, First, Middle Initial) STEVE OLDHAM Mailing Address Pendleton, IN 46064 City State Zip Code Pendleton IN 46064 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 040606-1 Amount of Each Receipt this Period 122.06
Name of Employer Roche Diagnostics Corp US Occupation Vp And General Counsel Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 244.12		
<b>C.</b> Full Name (Last, First, Middle Initial) Gerasimos Petratos Mailing Address 123 Radcliff Avenue City State Zip Code Port Washington NY 11050-1616 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 0303200691 Amount of Each Receipt this Period 208.00
Name of Employer Hoffmann-La Roche Inc. Occupation Association Clin Director Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 416.00		

**SUBTOTAL** of Receipts This Page (optional) .....

538.06

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

<b>A.</b> Full Name (Last, First, Middle Initial) Barbara Senich			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 798 Butternut Drive			<b>Transaction ID:</b> 03032006433	
City State Zip Code Franklin Lakes NJ 07417-2243		Amount of Each Receipt this Period 416.66		
FEC ID number of contributing federal political committee. C				
Name of Employer Roche Labs Inc.		Occupation Vice President Sales & Marketing Servi		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 833.32		
<b>B.</b> Full Name (Last, First, Middle Initial) Gary Zieziula			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6	
Mailing Address 103 Wynfield Lane			<b>Transaction ID:</b> 03032006379	
City State Zip Code New Hope PA 18938-5754		Amount of Each Receipt this Period 125.00		
FEC ID number of contributing federal political committee. C				
Name of Employer Roche Labs Inc.		Occupation Vice President Commercial Opns		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

541.66

**TOTAL** This Period (last page this line number only) .....

4035.53

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 / 17

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

<b>A.</b> Full Name (Last, First, Middle Initial) All America Pac		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6	
Mailing Address 607 14th Street Northwest Suite 800		<b>Transaction ID:</b> 46880-68879336118698	
City Washington	State DC	Zip Code 20005	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

2500.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 17

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

**A.** Full Name (Last, First, Middle Initial)  
Hatch Election Committee Inc

Mailing Address 175 South West Temple Suite 650

City	State	Zip Code
Salt Lake City	UT	84101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	8		2	0	0	6

Transaction ID: 46880-08121889829635

Amount of Each Receipt this Period

5000.00

Contribution Refund

SUBTOTAL of Receipts This Page (optional) .....

5000.00

TOTAL This Period (last page this line number only) .....

5000.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

Full Name (Last, First, Middle Initial)

## **A. Committee To Re-Elect Linda Sanchez**

Mailing Address 601 S Glenoaks Boulevard  
Suite 211

City Burbank State CA Zip Code 91502

Purpose of Disbursement  
2006 Primary

Candidate Name  
Linda Sanchez

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 39

Transaction ID: 40368-8628808856010

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Friends of Hillary**

Mailing Address 1717 K Street Northwest Suite 309A

City Washington State DC Zip Code 20036

Purpose of Disbursement

Candidate Name  
Hillary Clinton

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District:

Transaction ID: 12023904

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Hoosiers Supporting Buyer for Congress**

Mailing Address 200 North Main St. PO Box 712

City Monticello State IN Zip Code 47960

Purpose of Disbursement

Candidate Name  
Stephen Buyer

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 04

Transaction ID: 12050111

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

Full Name (Last, First, Middle Initial)

**A.** Kennedy for Senate 2006

Mailing Address 301 4th Street Northeast Suite 202

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement

Candidate Name  
Edward Kennedy

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MA District:

Transaction ID: 12023898

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** Kennedy for Senate 2006

Mailing Address 301 4th Street Northeast Suite 202

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement

Candidate Name  
Edward Kennedy

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District:

Transaction ID: 12023897

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Menendez for Senate

Mailing Address PO Box 848

City  
Union City

State  
NJ

Zip Code  
07087

Purpose of Disbursement

Candidate Name  
Robert Menendez

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District:

Transaction ID: 12023912

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

Full Name (Last, First, Middle Initial)

**A.** Menendez for Senate

Mailing Address PO Box 848

City  
Union City

State  
NJ

Zip Code  
07087

Purpose of Disbursement

Candidate Name  
Robert Menendez

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District:

Transaction ID: 12023915

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	0		2	0	0	6

Amount of Each Disbursement this Period

3500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

19000.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Roche Inc. Good Government Fund

Full Name (Last, First, Middle Initial)

**A.** Citizens to Elect Leslie Mortimer

Mailing Address P.O. Box 1222

City  
Jackson

State  
MI

Zip Code  
49204

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 12023892

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Cmte to Elect Bill Harris

Mailing Address 1238 Township Road 1506

City  
Ashland

State  
OH

Zip Code  
44805

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 12023896

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.** Team Coughlin

Mailing Address 2324 Iota Avenue

City  
Cuyahoga Falls

State  
OH

Zip Code  
44223

Purpose of Disbursement  
Nonfederal Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 12023893

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

1100.00